

Inspection report for children's home

Unique reference number	SC037647
Inspector	Sharon Lloyd
Type of inspection	Interim
Provision subtype	Children's home

Registered person	Knowsley Metropolitan Borough Council
Registered person address	Knowsley Metropolitan Borough Council, Education Offices Huyton Hey Road LIVERPOOL L36 5YH
Responsible individual	Paul Boyce
Registered manager	James Robert Allan De Turberville
Date of last inspection	24/10/2014

Inspection date	30/03/2015
Previous inspection	adequate
Enforcement action since last inspection	None.

This inspection

This home was judged adequate at the last full inspection. At this interim inspection Ofsted judge that it has **sustained effectiveness**.

The home has made significant progress in meeting all of the shortfalls identified at the last inspection and this has resulted in improvements in the quality of care, better oversight of the service and more individually focused delivery of care. Staff are better trained, communication with children is improving and partnership working is becoming well established. The improved effectiveness of the home is undermined by its failure to always take swift and appropriate action to support children who are ill. The importance of this shortfall is reflected in the overall judgement.

A good staff training programme is being rolled out which takes account of staff needs and their current level of competence. This is helping staff to improve the way they work with children. For example, all staff have received training in alternative communication methods and the home is routinely using signing alongside speech. This is helping staff to consolidate their learning and communicate more effectively with many of the children. As a result, the home has seen a reduction in some children's anxiety and frustration and improvements in their behaviour. More children are able to communicate their needs and wishes to staff, to contribute their views to their daily planning and to tell staff if there is something wrong.

The whole staff team has received health competency training. This equips them with the skills they need to support children with particular health conditions, including epilepsy and to administer suction and tube feeds. As a result, children with complex health needs are better supported by staff who know how to meet their individual health care needs.

Provider reports produced by the independent visitor to the home have improved. They demonstrate effective evaluation of the quality of care. Reports identify areas for improvement which the home address and this is driving up the quality of care

and the standard of record keeping in the home. The visitor routinely seeks the views of children, families and placing social workers and this ensures service users have a strong voice in the development and delivery of the service.

There have been no complaints since the last inspection. No children have gone missing and no children have been restrained. There have been a small number of incidents between peers and the home has intervened appropriately and taken action to reduce the likelihood of this happening again. This includes ensuring very close supervision of children, recognition of triggers that result in anti-social behaviour and action to reduce children's anxieties and frustrations.

Staff make valuable contributions to children's short break and special educational needs reviews. They observe children in school and build strong relationships with parents and teachers. Through better partnership working with schools, psychologists, health professionals and families, the home is effectively driving improved consistency of care, as well as better understanding and communication between those caring for children.

Bimonthly, positive behaviour surgeries have been introduced. These are run by expert consultants who provide advice, support and guidance to the staff team, school and parents. In partnership, they have developed new and improved, behaviour management strategies for working with individual children who display particularly challenging behaviour. The individually tailored strategies are proving effective in delivering better consistency of care across all settings. Early signs are promising, with children learning to manage their feelings and their behaviour in more socially acceptable ways, displaying less aggression, being more relaxed and enjoying their lives more.

The home has taken action to improve its ability to protect children from the risk of fire. The importance of fire safety procedures has been discussed at a staff meeting and the registered manager has improved the systems for monitoring fire drills. Through practising evacuation of the premises, staff know how to keep children safe from fire and are more likely to respond effectively in the event of a real emergency. A few children have been distressed during the fire drill. The home is reflecting on its practice to reduce any anxiety or confusion during future drills. Some children have been involved in producing a short film about the home's fire safety procedures, which clearly demonstrates they know how to respond in the event of a fire. Some have designed informative posters about fire safety, which are displayed on the notice board in the lounge. This shows how the home is working to raise children's awareness of fire safety.

The home has developed its children's guide in six different formats, which can be easily amended to meet the needs of individual children. The guides use a mixture of symbols, pictures and words to share information about the home in accordance with each child's level of ability and communication style. Each child who currently uses the service has their own, individually tailored guide and some parents report

they are using the guides successfully to talk to children about the home and to help prepare children for their next short break. Although these documents serve their purpose well, the home is excited about developing them further still, recognising the potential to use modern technology to share information about the service more effectively with a range of children.

The home maintains very detailed placement plans for children but is developing more focused plans that identify specifically what it needs to do to help children make progress in their lives. It has begun to update its placement plans accordingly, identifying particular developmental or behavioural milestones for individual children, with set timeframes for review. Targeted support for some children, for example, involves encouragement to develop particular self-care skills when using the bathroom and for others, to settle at bedtime and sleep through the night. This is a work in progress and the reporting systems for staff to evidence how they are driving children's progress are not yet fully established so the home is not yet able to provide strong written evidence of the difference it is making.

The staff recruitment policy for internal transfers has been updated to ensure that two references are taken up on staff applying to transfer to work at the home from other local authority provision. In addition, the registered manager has sought assurance from the local authority human resources team that they have amended their procedures to reflect the new policy. Although the policy has not yet been tested, if followed appropriately alongside other checks already in place, it will enable proper assessment of the suitability of applicants to work at the home.

Parents speak very highly of the home, describing how the staff meet children's individual needs, promote their independence and provide an enjoyable and stimulating environment, saying, 'It's a great place'. They describe the home as 'wonderful, spot-on, brilliant, fantastic' and speak with enthusiasm and gratitude about the commitment and dedication of the staff team. Parents know and are confident in the home's routines, including the medicine administration procedures and safeguarding procedures. They report that children enjoy their short breaks and look forward to going. They describe excellent communication with themselves and their child's school.

In recognition of the complex health needs of many of the children who use the service, the home's medicine administration policy provides for the administration of prescribed medicines only. However, the home does not routinely ensure that all children bring prescribed pain killers and medicines for fever reduction to be administered in the event of an unforeseen illness. Consequently, where a child is suffering from a high temperature, fever or pain, the home relies on the parent to attend to administer pain and fever relief. Where the home is unable to make contact with the parent, the child does not receive the medicine required to reduce pain and fever quickly. Night staff do not always seek medical advice or managerial support in these circumstances. Consequently, some children have suffered the ill-effects of a raised temperature for several hours through the night without

appropriate pain relief. This means that children suffer unnecessarily because the systems in place are not sufficiently robust to ensure children get the treatment they need when they need it. The Registered Manager is reviewing the home's policy and procedures to reduce the likelihood of this happening again.

Information about this children's home

This is a local authority children's home providing short breaks for up to four children with learning or physical disabilities. Most of the children staying for short breaks are not in the care of the local authority and their parents have the primary responsibility for their health care and education.

Recent inspection history

Inspection date	Inspection type	Inspection judgement
24/10/2014	Full	adequate
25/02/2014	Interim	good progress
27/11/2013	Full	good
07/03/2013	Interim	satisfactory progress

What does the children's home need to do to improve further?

Statutory Requirements

This section sets out the actions which must be taken so that the registered person/s meets the Care Standards Act 2000, Children's Homes Regulations 2001 and the National Minimum Standards. The registered person(s) must comply with the given timescales.

Reg.	Requirement	Due date
20 (2001)	ensure that each child has access to such medical, dental, nursing, psychological and psychiatric advice, treatment and other services as he may require. In particular, ensure that children in need of pain or fever relief receive appropriate medication, which is specified in their individual health plans and follows medical advice. (Regulation 20 (2)(b))	25/04/2015

What inspection judgements mean

At the interim inspections we make a judgement on whether the home has improved in effectiveness, sustained effectiveness, or declined in effectiveness since the previous full inspection. This is in line with the *Inspection of children's homes: framework for inspection*.

Information about this inspection

The purpose of this inspection is to assure children and young people, parents, the public, local authorities and government of the quality and standard of the service provided. The inspection was carried out under the Care Standards Act 2000 to assess the effectiveness of the service and to consider how well it complies with the relevant regulations and meets the national minimum standards.

The report details the main strengths, any areas for improvement, including any breaches of regulation, and any failure to meet national minimum standards. The judgements included in the report are made against the framework of inspection for children's homes.